

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A

Page 1 of 1 LEGISLATIVE RESOURCE CENTER

For use by Members, officers, and employees

MAY 13 PM 12:05

JOHN A. SULLIVAN

(Full Name)

202-225-2211

(Daytime Telephone)

U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
(Office Use Only)

Filer
Status

☒ Member of the U.S.
House of Representatives

State: OK
District: 01

☐ Officer Or
Employee

Employing Office:

Report
Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

**A \$200 penalty shall
be assessed against
anyone who files
more than 30 days
late.**

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? If yes, complete and attach Schedule VI.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? If yes, complete and attach Schedule VII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? If yes, complete and attach Schedule V.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Trusts-	Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Exemptions--	Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name JOHN A. SULLIVAN

Page 2 of 4

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchange (E) exceeding \$1,000 in reporting year.
American Bank of Oklahoma accounts	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
Rental house - 44th Street, Tulsa, OK	None	RENT	\$15,001 - \$50,000	S

SCHEDULE IV - TRANSACTIONS

Name JOHN A. SULLIVAN

Page 3 of 4

Report any purchase, sale, or exchange by you, your spouse, or dependent child during this reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Rental house - 44th Street, Tulsa, OK	S	No	9-7-10	\$500,001 - \$1,000,000

SCHEDULE V - LIABILITIES

Name JOHN A. SULLIVAN

Page 4 of 4

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
	Bank of America	June 2005	Mortgage on 44t Steet, Tulsa, OK rental home (sold 9-7-10)	\$500,001 - \$1,000,000

**UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT**

FORM A Page 1 of 8
For use by Members, officers, and employees

HAND DELIVERED

David Daniel Boren
(Full Name)

202-225-2701
(Daytime Telephone)

2011 MAY 15 PM 1:59

(Office Use Only)

Filer Status

☒ Member of the U.S. House of Representatives

State: OK
District: 2

☐ Officer Or Employee

Employing Office:

U.S. HOUSE OF REPRESENTATIVES

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts--</p>	<p>Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions--</p>	<p>Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

SCHEDULE I - EARNED INCOME

Name David Daniel Boren

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Muskogee Women's Clinic	Spouse Salary	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David Daniel Boren

Page 3 of 8

<p>BLOCK A</p> <p>Asset and/or Income Source</p> <p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or</p>	<p>BLOCK B</p> <p>Year-End Value of Asset</p> <p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>BLOCK C</p> <p>Type of Income</p> <p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>BLOCK D</p> <p>Amount of Income</p> <p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>BLOCK E</p> <p>Transaction</p> <p>Indicate if asset had purchase (P), sales (S), or exchange (E) exceeding \$1,000 in reporting year.</p>
American Bank of Oklahoma CD	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
Ava O LLC, Minerals Madill, OK	\$15,001 - \$50,000	other: partnership income	\$15,001 - \$50,000	
JT BancFirst Checking Account	\$1,001 - \$15,000	Interest	\$201 - \$1,000	
JT Boren Ranch LLC McIntosh County, OK	None	None	NONE	S
JT Boren Ranch LLC Pittsburg County, OK	\$500,001 - \$1,000,000	other: hunting lease	\$2,501 - \$5,000	S (253 acres) P (110 acres)

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David Daniel Boren

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JT	Boren Ranch LLC McIntosh County Note Payable Homer Morse	\$100,001 - \$250,000	Other: (Note payable- 10 yr. Note, % percent interest for 10 years)	\$5,001 - \$15,000	
JT	Boren Ranch LLC Checking Account Citizens Security Bank	\$15,001 - \$50,000	None	NONE	
JT	Boren Ranch LLC Pittsburg County Note Payable Ross Laxson	None	other (no interest loan) on sale of 15.9 acres	\$5,001 - \$15,000	paid off
	Chinn Exploration Co.	\$1 - \$1,000	Royalty	\$1 - \$200	
	First National Bank of Wewoka Checking	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
	First National Bank of Wewoka checking	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
	First United Bank tax account/ LPL	\$15,001 - \$50,000	INTEREST	\$201 - \$1,000	
	Land Oil Company, Ltd. (LOCL) also known as Little Land Co	\$250,001 - \$500,000	other: partnership income	\$100,001 - \$1,000,000	
	LOCL interest in courage special situation fund, LP investment, Nashville, TN	\$15,001 - \$50,000	other: partnership income	\$5,001 - \$15,000	
	LOCL real estate in ADA, OK	\$1,001 - \$15,000	RENT	\$1 - \$200	
	LOCL Red River Pine LLC Madill, OK Timber Harvests	\$250,001 - \$500,000	other: partnership income	\$1,001 - \$2,500	
	LOCL- note receivable from JB Coleman Kigston, OK	\$1,001 - \$15,000	RENT	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name David Daniel Boren

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	Retirement accounts MFS SFPTR1 Strategic growth IRA (MSBGX)	\$1,001 - \$15,000	None	NONE	
	SEP IRA Scudder Total Return IRA (KTRBX)	\$15,001 - \$50,000	None	NONE	
DC	Walt Disney Stock	\$1,001 - \$15,000	None	NONE	

SCHEDULE IV - TRANSACTIONS

Name David Daniel Boren

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SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	Boren Ranch LLC McIntosh County, OK	S	No	august 2010	\$100,001 - \$250,000
JT	Boren Ranch LLC Pittsburg County	S(part)	No	february 2010	\$100,001 - \$250,000
JT	Boren Ranch LLC Pittsburg County, OK	P	N/A	January 2010	\$50,001 - \$100,000

SCHEDULE V - LIABILITIES

Name David Daniel Boren

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Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	First United Bank Durant, OK		Loan on Boren Ranch, LLC Pittsburg County Land	\$100,001 - \$250,000
JT	First United Bank Durant, OK		Fence and equiptment loan and line of credit for Boren Ranch, LLC Pittsburg County Land	\$15,001 - \$50,000

SCHEDULE VIII - POSITIONS

Name David Daniel Boren

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Managing Partner	Boren Ranch, LLC Muskogee, OK
Partner	AVA O Limited Company, Madill, OK
Partner	Land Oil Company, Madill, OK
Partner	Red River Pine, Ltd., Madill, OK
Member of Board	Jasmine Moran Children's Museum, Seminole, OK
Member of Board	National Rifle Association

UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT		FORM A Page 1 of 7 For use by Members, officers, and employees		LEGISLATIVE RESOURCE CENTER 2011 MAY 13 PM 1:23 OFFICE OF THE CLERK U.S. HOUSE OF REPRESENTATIVES
Frank D. Lucas (Full Name)		202-225-5565 (Daytime Telephone)		HAND DELIVERED (Office Use Only)
Filer Status	<input checked="" type="checkbox"/> Member of the U.S. House of Representatives State: <u>OK</u> District: <u>3</u>	<input type="checkbox"/> Officer Or Employee	Employing Office: _____ Termination Date: _____	
Report Type	<input checked="" type="checkbox"/> Annual (May 15)	<input type="checkbox"/> Amendment	<input type="checkbox"/> Termination	
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SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frank D. Lucas

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BLOCK A
Asset and/or Income Source

Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.

Provide complete names of stocks and mutual funds (do not use ticker symbols.)

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For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.

Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement

BLOCK B
Year-End Value of Asset

at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."

BLOCK C
Type of Income

Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.

BLOCK D
Amount of Income

For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.

BLOCK E
Transaction

Indicate if asset had purchase (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.

	Panhandle Oil & Gas Inc	\$15,001 - \$50,000	DIVIDENDS	\$1 - \$200	
	Panhandle Oil & Gas Inc	\$1,001 - \$15,000	CAPITAL GAINS	\$5,001 - \$15,000	S(part)
JT	Security State Bank, Cheyenne, OK	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
SP	Western Farm Bureau (not self directed)	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	103 acres - Mineral Rights, Roger Mills Co., Oklahoma	\$250,001 - \$500,000	see below individual companies	see below companies	
	Apache Corporation	None	Royalty	\$5,001 - \$15,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frank D. Lucas

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	SM Energy Company (formerly St Mary Operating Co)	None	Royalty	\$1,001 - \$2,500	
	BP America Production Co.	None	Royalty	\$5,001 - \$15,000	
	Plain Marketing	None	Royalty	\$1 - \$200	
	Cimerax Energy Co.	None	Royalty	\$201 - \$1,000	
	Encore Operating (formerly Exco Midcontinent)	None	Royalty	\$201 - \$1,000	
	Quantum Resources	None	Royalty	\$201 - \$1,000	
DC	Security State Bank, Cheyenne, Oklahoma	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	Public Employee Retirement	\$15,001 - \$50,000	None	NONE	
	480 acres - Farmland, Roger Mills Co. Oklahoma	\$250,001 - \$500,000	Farm Income	\$50,001 - \$100,000 Gross	
JT	508 acres - Farmland, Roger Mills Co. Oklahoma	\$250,001 - \$500,000	Farm Income	see income above	
JT	320 acres - Farmland, Roger Mills Co. Oklahoma	\$100,001 - \$250,000	Farm Income	see income above	
SP	Oklahoma Teacher Retirement (not self directed)	\$1,001 - \$15,000	None	NONE	
SP	Texas Teacher Retirement (not self directed)	\$1,001 - \$15,000	None	NONE	
JT	Bearcat Land	None	Gas well drilling damages	\$5,001 - \$15,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Frank D. Lucas

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JT	Bearcat Land	None	pipeline right-of-way damages	\$5,001 - \$15,000	
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SCHEDULE IV - TRANSACTIONS

Name Frank D. Lucas

Page 5 of 7

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SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
	Panhandle Oil & Gas Inc	S(part)	Yes	01-13-2010	\$1,001 - \$15,000

SCHEDULE V - LIABILITIES

Name Frank D. Lucas

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Report liabilities of over \$10,000 owed to any one creditor at any time during this reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Excludes: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability
JT	Security State Bank, Cheyenne, Oklahoma	December 2000	Mortgage on 508 acres Farmland, Roger Mills Co. Oklahoma	\$100,001 - \$250,000
JT	Security State Bank, Cheyenne, Oklahoma	1987	Operating Note (farm operating loan)	\$50,001 - \$100,000
JT	Farm Credit of Western Oklahoma, Woodward, Oklahoma	November 2009	Line of Credit	\$100,001 - \$250,000
SP	Bank of America	December 2010	Revolving Credit Account	\$15,001 - \$50,000
	Chase Bank USA	December 2010	Revolving Credit Account	\$15,001 - \$50,000
	American Express	December 2010	Revolving Credit Account	\$15,001 - \$50,000
JT	Farm Plan	December 2010	Revolving Credit Account	\$15,001 - \$50,000
JT	Farm Credit of Western Oklahoma, Woodward, OK	September 2010	Mortgage on 320 acres Farmland, Roger Mills Co. Oklahoma	\$100,001 - \$250,000
JT	Security State Bank, Cheyenne, Oklahoma	July 2006	note on JD 6615 Tractor	\$15,001 - \$50,000

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Frank D. Lucas

Page 7 of 7

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Franklin Center for Global Policy Exchange	November 7 - 12	OKC - Istanbul - OKC	Y	Y	Y	none

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

FORM A Page 0 of 0
For use by Members, officers, and employees

HAND DELIVERED

Thomas Jeffery Cole
(Full Name)

202.225.6165
(Daytime Telephone)

LEGISLATIVE RESOURCE CENTER

2011 MAY 16 AM 11:04

MC

(Office Use Only)

Filer Status

☒ Member of the U.S. House of Representatives
State: OK
District: 4

☐ Officer Or Employee

Employing Office:

Report Type

☒ Annual (May 15)

☐ Amendment

☐ Termination

Termination Date:

A \$200 penalty shall be assessed against anyone who files more than 30 days late.

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule I.</p>	<p>VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule VI.</p>
<p>II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule II.</p>	<p>VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule VII.</p>
<p>III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule III.</p>	<p>VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule VIII.</p>
<p>IV. Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule IV.</p>	<p>IX. Did you have any reportable agreement or arrangement with an outside entity? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></p> <p>If yes, complete and attach Schedule IX.</p>
<p>V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p> <p>If yes, complete and attach Schedule V.</p>	<p>Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.</p>

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

<p>Trusts--</p>	<p>Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
<p>Exemptions--</p>	<p>Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all the criteria for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.</p>	<p>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>

FOOTNOTES

		Name		
Number	Section / Schedule	Footnote	This note refers to the following item	

SCHEDULE I - EARNED INCOME

Name Thomas Jeffery Cole

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Cole, Hargrave, Snodgrass and Associates	Management Fee	\$20,000

SCHEDULE II - PAYMENTS MADE TO CHARITY IN LIEU OF HONORARIAName *Thomes Jeffery Cole*

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Ethics. A green envelope for transmitting the list is included in each Member's filing package. Employees may request a green envelope from the Clerk or use a plain envelope that is appropriately labeled.

Source	Activity	Date	Amount
Cole, Hargrave, Snodgrass, and Associates	Management Fee	Quarterly	\$20,000 annually

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

BLOCK A		BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source		Year-End Value of Asset	Type of Income	Amount of Income	Transaction
<p>Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.</p> <p>Provide complete names of stocks and mutual funds (do not use ticker symbols.)</p> <p>For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to elect the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period.</p> <p>For rental or other real property held for investment, provide a complete address.</p> <p>For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.</p> <p>Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or</p>		<p>at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."</p>	<p>Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.</p>	<p>For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.</p>	<p>Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.</p>
	Cole, Hargrave, Snodgrass and Associates, Oklahoma City (stock)	\$250,001 - \$500,000	Dividends/Capital Gains	\$15,001 - \$50,000	
JT	Midfirst Bank Money Market Fund	\$50,001 - \$100,000	Interest	\$201 - \$1,000	
JT	Personal Residence	\$100,001 - \$250,000	None	NONE	
	10 acres of land in Johnson County, OK (owned jointly with John D. Cole)	\$1,001-\$5,000	None	NONE	
	Strategic Communications Moore, OK (stock)	\$250,001 - \$500,000	Dividends/Capital Gains	\$15,001 - \$50,000	
JT	Burke and Herbert Bank Money Market Fund	\$15,001 - \$50,000	Interest	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

JT	Fidelity Spartan Money Market Fund	\$50,001 - \$100,000	Interest	\$1 - \$200	
	MUTUAL FUNDS				
JT	American Century Tax Free Bond Fund	\$100,001 - \$250,000	DIVIDENDS/CAPITAL GAINS	\$5,001 - \$15,000	P
JT	Fidelity Municipal Income Fund	\$100,001 - \$250,000	Dividends/Capital Gains	\$5,001 - \$15,000	P
JT	Fidelity Contrafund	\$1,001 - \$15,000	Dividends/Capital Gains	\$1 - \$200	P
JT	Fidelity Select Healthcare Fund	\$15,001 - \$50,000	Dividends/Capital Gains	Capital Gains Loss/None	S
JT	Fidelity Dividend Growth Fund	\$15,001 - \$50,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Fidelity Spartan 500 Index Fund	\$50,001 - \$100,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Fidelity Select Financial Services Fund	\$1,001 - \$15,000	Dividends/Capital Gains	Under 200/Cap Gains loss	S
JT	Vanguard High Yield Tax Exempt Funds	\$100,001 - \$250,000	Dividends/Capital Gains	\$5,001 - \$15,000	P
JT	Vanguard Total International Stock Fund	\$100,001 - \$250,000	Dividends/Capital Gains	\$5,001 - \$15,000	P
JT	Vanguard Total Stock Market Index Fund	\$100,001 - \$250,000	Dividends/Capital Gains	\$5,001 - \$15,000	P
JT	Baron Asset Fund	\$15,001 - \$50,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	T Rowe Price Equity Income Fund	\$100,001 - \$250,000	Dividends/Capital Gains	\$1,001 - \$5,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

JT	Vanguard Inflation Protected Securities Fund	\$5,001-\$50,000	Dividends/Capital Gains	\$201 - \$1,000	P
	STOCKS				
JT	Spectra Energy	\$1,001 - \$15,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	International Business Machines	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001-\$5,000	P
JT	Wells Fargo and Company	\$15,001 - \$50,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Duke Energy	\$15,001 - \$50,000	Dividends/Capital Gains	\$1,001 - \$2,500	P
JT	Exxon Mobil Corporation	\$15,001 - \$50,000	Dividends/Capital Gains	\$1,001 - \$2,500	P
SP	Alliant Corporation	\$15,001 - \$50,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Regions Financial	\$1,001 - \$15,000	Dividends/Capital Gains	\$1 - \$200	
JT	Pfizer, Inc.	\$1,001 - \$15,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Tronox, Inc	\$1 - \$1,000	Dividends/Capital Gains	\$1 - \$200	
JT	Walgreen Corp	\$15,001 - \$50,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Walmart Stores, Inc	\$1,001 - \$15,000	Dividends/Capital Gains	\$201 - \$1,000	
JT	Johnson Controls	\$50,001 - \$100,000	Dividends/Capital Gains	\$5,001 - \$15,000	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

JT	AT&T, Inc	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
JT	Equifax, Inc	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	S
JT	Microsoft, Inc	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
JT	Hewlett Packard	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	S
JT	Becton Dickinson & Company	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	TOM COLE'S FIDELITY IRA				
	Fidelity Total Bond Fund	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$5,001 - \$15,000	P
	Fidelity Contrafund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	Fidelity Spartan 500 Index Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
	Fidelity Diversified International Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
	ELLEN COLE'S FIDELITY IRA				
SP	Fidelity Total Bond Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$2,501 - \$5,000	P
SP	Fidelity Contrafund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
SP	Fidelity Spartan 500 Index Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

SP	Fidelity Diversified International Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
	ANNUITY				
JT	Fidelity VIP Individual Freedom 2020 Fund (Not self-directed)	\$50,001 - \$100,000	DIVIDENDS/CAPITAL GAINS	\$2,501 - \$5,000	P
	TOM COLE'S FEDERAL THRIFT SAVINGS PLAN				
	G Fund	\$100,001 - \$250,000	DIVIDENDS/CAPITAL GAINS	\$5,001 - \$15,000	P
	F Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
	C Fund	\$100,001 - \$250,000	DIVIDENDS/CAPITAL GAINS	\$5,001 - \$15,000	P
	S Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
	I Fund	\$15,001 - \$50,000	DIVIDENDS/CAPITAL GAINS	\$1,001 - \$2,500	P
	TOM COLE'S COLE, HARGRAVE, SNODGRASS 401K				
	Franklin Income Fund A	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
	Credit Suisse Capital Appreciation Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	
	Franklin MSF Mutual Share Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	
	Franklin Small/Med Cap Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

Franklin Balance Stock Investment Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Lord Abbott Core Fixed Income Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Lord Abbott Mid Cap Value Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
Oppenheimer Main Street Fund Class A	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
Oppenheimer Global Fund Class A	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	
Pimco High Yield Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Putnam International Equity Fund A	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
Strong Government Securities Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Templeton Foreign Fund A	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
Vankemp Common Stock Fund A	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	NONE	
TOM COLE'S 457 SOONER SAVINGS				
T Rowe Price Balanced Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	
Europacific A Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$1 - \$200	
American Century Income and Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPITAL GAINS	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name Thomas Jeffery Cole

	Columbia Acorn Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$1 - \$200	
	Janus Small Cap Value Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	NONE	
	T Rowe Price Blue Chip Growth Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$201 - \$1,000	
	Dreyfus Premium Leader A Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$1 - \$200	
	BGI SDP Stock Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$201 - \$1,000	
	ELLEN COLE'S 401K				
SP	Fidelity Total Bond Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$1,001 - \$5,000	
SP	Fidelity Spartan 500 Index Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$201 - \$1,000	
SP	Fidelity Diversified International Fund	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	\$201 - \$1,000	
	TOM COLE'S ANNUITY				
	State Farm Insurance Annuity (Not self-directed)	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	NONE	
	ELLEN COLE'S ANNUITY				
SP	State Farm Insurance Annuity (Not self-directed)	\$1,001 - \$15,000	DIVIDENDS/CAPIT AL GAINS	NONE	

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain In Excess of \$200?	Date	Amount of Transaction
JT	American Century Tax Free Bond Fund	P	N/A	Monthly	\$5,001-\$15,000
JT	AT&T, Inc	P	N/A	Quarterly	\$1,001-\$5,000
	C Fund (Federal Thrift Savings Plan)	P	N/A	Monthly	\$5,001-\$15,000
JT	Duke Energy	P	N/A	Quarterly	\$1,001-\$5,000
JT	Equifax, Inc stock	S	Yes	09-24-10	\$5,001-\$15,000
JT	Exxon Mobil Corporation	P	N/A	Quarterly	\$1,001-\$5,000
	F Fund (Federal Thrift Savings Plan)	P	N/A	Monthly	\$1,001-\$2,500
SP	Fidelity Diversified International Fund (IRA)	P	N/A	01-12-10	\$1,001-\$5,000
	Fidelity Diversified International Fund (IRA)	P	N/A	01-11-10	\$1,000-\$5,000
JT	Fidelity Municipal Income Fund	P	N/A	Monthly	\$5,001-\$10,000
JT	Fidelity Select Financial Services Fund	S	No	10-28-10	\$5,001-\$15,000

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	Fidelity Select Healthcare Fund	S	No	10-04-10	\$15,000-\$50,000
JT	Fidelity Spartan 500 Index Fund	P	N/A	10-28-10	\$5,001-\$15,000
SP	Fidelity Spartan 500 Index Fund (IRA)	P	N/A	01-12-10	\$1,001-\$5,000
SP	Fidelity Total Bond Fund (Ellen Cole's 401K)	P	N/A	Monthly	\$1,001-\$2,500
	Fidelity Total Bond Fund (IRA)	P	N/A	01-11-10	\$5,001-\$15,000
SP	Fidelity Total Bond Fund (IRA)	P	N/A	01-12-10	\$1,001-\$5,000
JT	Fidelity VIP Individual Freedom 2020 Fund	P	N/A	Monthly	\$1,001-\$5,000
	G Fund (Federal Thrift Savings Plan)	P	N/A	Monthly	\$5,001-\$15,000
JT	Hewlett Packard Inc stock	S	Yes	09-27-10	\$1,001-\$5,000
	I Fund (Federal Thrift Savings Plan)	P	N/A	Monthly	\$1,001-\$2,500
JT	International Business Machines				

SCHEDULE IV - TRANSACTIONS

Name Thomas Jeffery Cole

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.

SP, DC, JT	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
JT	International Business Machines, Inc stock	P	N/A	10-13-10	\$2,501-\$5,000
JT	Johnson Controls stock	P	N/A	10-16-10 Quarterly	\$5,001-\$15,000
	S Fund (Federal Thrift Savings Plan)	P	N/A	Monthly	\$1,001-\$2,500
JT	T Rowe Price Equity Income Fund	P	N/A	Quarterly	\$1,001-\$5,000
JT	Vanguard High Yield Tax Exempt Fund	P	N/A	Monthly	\$15,001-\$50,000
JT	Vanguard Inflation Protected Securities Fund	P	N/A	09-20-10	\$1,001-\$5,000
JT	Vanguard Inflation Protected Securities Fund	P	N/A	06-17-10	\$1,001-\$5,000
JT	Vanguard Inflation Protected Securities Fund	P	N/A	05-17-10	\$1,001-\$5,000
JT	Vanguard Total International Stock Fund	P	N/A	Quarterly	\$15,001-\$50,000
JT	Vanguard Total Stock Market Index Fund	P	N/A	Monthly	\$5,001-\$15,000

SCHEDULE V - LIABILITIES

Name

Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000.

SP, DC, JT	Creditor	Date Liability Incurred	Type of Liability	Amount of Liability

SCHEDULE VI - GIFTS

Name	
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Report the source, a brief description, and the value of all gifts totaling more than \$335 received by you, your spouse, or a dependent child from any source during the year. Excludes: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$134 or less need not be added towards the \$335 disclosure threshold. Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rules.

Source	Description	Value

SCHEDULE VII - TRAVEL PAYMENTS AND REIMBURSEMENTS

Name Thomas Jeffery Cole

Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totaling more than \$335 received by you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor. Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you.

Source	Date(s)	Point of Departure-- Destination--Point of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Days not at sponsor's expense
Heritage Foundation	Jan 14-16	DC-Charlottesville, VA-DC	Y	Y	N	0
			N	N	N	

SCHEDULE VIII - POSITIONS

Name Thomas Jeffery Cole

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Fulbright Association (Uncompensated)
Partner	Strategic Communications (Unearned Income, dividends, and capital gains)
Partner	Cole, Hargrave, Snodgrass, and Associates (Unearned Income, dividends, capital gains, and management fees)
Board of Directors for the Congressional Program	Aspen Institute (Uncompensated)

SCHEDULE VIII - POSITIONS

Name Thomas Jeffery Cole

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Board of Directors	Fulbright Association (Uncompensated)
Partner	Strategic Communications (Unearned Income, dividends, and capital gains)
Partner	Cole, Hargrave, Snodgrass, and Associates (Unearned Income, dividends, capital gains, and management fees)
Board of Directors for the Congressional Program	Aspen Institute (Uncompensated)

SCHEDULE IX - AGREEMENTS

Name Thomas Jeffery Cole

Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Date	Parties To	Terms of Agreement
04-20-03	Cole, Hargrave, Snodgrass, and Associates	Quarterly management fee of \$5,000 from personal business (Approved by Committee on Standards)

TOM COLE
4TH DISTRICT, OKLAHOMA

DEPUTY WHIP

COMMITTEE ON APPROPRIATIONS

SUBCOMMITTEES:

LABOR, HEALTH AND HUMAN SERVICES,
EDUCATION, AND RELATED AGENCIES

INTERIOR, ENVIRONMENT, AND RELATED AGENCIES
LEGISLATIVE BRANCH

Congress of the United States
House of Representatives
Washington, DC 20515-3604

PLEASE REPLY TO:
☐ 2458 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON, DC 20515
(202) 225-6165

☐ 2420 SPRINGER DRIVE
SUITE 120
NORMAN, OK 73069
(405) 329-6500

☐ 711 SW D AVENUE
SUITE 201
LAWTON, OK 73501
(580) 357-2131

☐ 104 EAST 12TH
ADA, OK 74820
(580) 436-5375

May 31, 2011

Office of the Clerk
H-154, The Capitol
Washington, DC

To The Clerk of the House:

The purpose of this letter is to request an Amendment to my 2010 Financial Disclosure forms.
The change is below:

Schedule II - Payments Made to Charity in Lieu of Honoraria

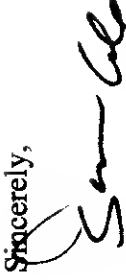
- This section should be BLANK.

Schedule I- Earned Income

- Source: Cole, Hargrave, Snodgrass, and Associates
Type: Management Fee
Amount: \$20,000

Please do not hesitate to contact me at 202.225.6165, should you have any questions regarding this change.

Sincerely,



Tom Cole
Member of Congress

LEGISLATIVE RESOURCE CENTER
2011 MAY 31 PM 3:27
STEPH. W. CLARK
U.S. HOUSE OF REPRESENTATIVES

INSIDE MAIL

UNITED STATES HOUSE OF REPRESENTATIVES
CALENDAR YEAR 2010 FINANCIAL DISCLOSURE STATEMENT

Form A
 For use by Members, officers, and employees

Page 1 of ____

LEGISLATIVE RESOURCE CENTER

2011 MAY 16 AM 11:00 ✓

OFFICE OF THE CLERK
 U.S. HOUSE OF REPRESENTATIVES

Name: JAMES LANKFORD

Daytime Telephone: 202 225-2132

HAND DELIVERED

(Office Use Only)

Filer Status

☒

Member of the U.S.
 House of Representatives

State: OK

District: 5

☐

Officer or
 Employee

Employing Office: _____

Report Type

☒

Annual (May 16, 2011)

☐

Amendment

☐

Termination

Termination Date: _____

**A \$200 penalty shall be assessed
 against anyone who files more than
 30 days late.**

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?
 If yes, complete and attach Schedule I.

Yes ☒ No ☐

VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$335 and not otherwise exempt)?
 If yes, complete and attach Schedule VI.

Yes ☐ No ☒

II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period?
 If yes, complete and attach Schedule II.

Yes ☐ No ☒

VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$335 from one source)?
 If yes, complete and attach Schedule VII.

Yes ☐ No ☒

III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period?
 If yes, complete and attach Schedule III.

Yes ☒ No ☐

VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year?
 If yes, complete and attach Schedule VIII.

Yes ☐ No ☒

IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period?
 If yes, complete and attach Schedule IV.

Yes ☒ No ☐

IX. Did you have any reportable agreement or arrangement with an outside entity?
 If yes, complete and attach Schedule IX.

Yes ☐ No ☒

V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period?
 If yes, complete and attach Schedule V.

Yes ☐ No ☒

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?

Yes ☐ No ☒

EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.

Yes ☐ No ☒

SCHEDULE I - EARNED INCOME

Name James Paul Lankford

Page 2 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Baptist General Convention of Texas	Conference Leadership in Ft. Worth, Amarillo, Grapevine	\$4,000
Northwest Baptist Church	Speaking	\$500
Seward Road	Speaking Multiple Times	\$3,390
Baptist General Convention of Oklahoma	Consulting	\$2,847
South Tulsa Baptist Church	Speaking	\$1,000
First Baptist Church Muskogee	Speaking	\$200
South Canadian Association, Oklahoma	Speaking	\$200
First Baptist Church, Chickasha	Speaking	\$200
Country Estates Baptist Church	Speaking Multiple Times	\$1,363
First Baptist Church, Edmond	Speaking	\$500
Emmaus Baptist Church, Moore	Speaking	\$250
Phillippine International Church, Moore	Speaking	\$200
NewChurch, OKC	Speaking	\$1,000

SCHEDULE I - EARNED INCOME

Name James Paul Lankford

Page 3 of 5

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000.

Source	Type	Amount
Gateway Community Church, OKC	Speaking	\$200
Families for James Lankford	Salary	\$6,255
Speech Langugae Pathology Services	Spouse	N/A

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James Paul Lankford

Page 4 of 5

BLOCK A	BLOCK B	BLOCK C	BLOCK D	BLOCK E
Asset and/or Income Source Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year. Provide complete names of stocks and mutual funds (do not use ticker symbols.) For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have the power, even if not exercised, to select the specific investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address. For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A. Exclude: Your personal residence, including second homes and vacation homes (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or	Year-End Value of Asset at close of reporting year. If you use a valuation method other than fair market value, please specify the method used. If an asset was sold and is included only because it is generated income, the value should be "None."	Type of Income Check all columns that apply. For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Amount of Income For retirement accounts that do not allow you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you may check the "None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends, interest, and capital gains, even if reinvested, must be disclosed as income. Check "None" if no income was earned or generated.	Transaction Indicate if asset had purchases (P), sales (S), or exchanges (E) exceeding \$1,000 in reporting year.
JT Fidelity Capital Appreciation AAGPX (IRA)	\$1,001 - \$15,000	None	NONE	
JT Fidelity Advisor New Insights CL 1 - FINSX (IRA)	\$1,001 - \$15,000	None	NONE	
JT American Beacon Large Cap Investor - FDCAX (IRA)	\$1,001 - \$15,000	None	NONE	
JT Columbia Value and Restructuring CL Z - UMBIX (IRA)	\$1,001 - \$15,000	None	NONE	
JT Global Equity Index Option - TIAA CREF (529)	\$1,001 - \$15,000	None	NONE	
JT American Beacon Large Cap Investor - FDCAX	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME

Name James Paul Lankford

Page 5 of 5

JT	Columbia Value and Restructuring CL Z - UMBIX	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Fidelity Advisor New Insights CL 1 - FINSX	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Fidelity Capital Appreciation AAGPX	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
JT	Global Equity Index Option - TIAA CREF (529)	\$1,001 - \$15,000	None	NONE	
JT	Guidestone Aggressive Allocation (IRA)	\$15,001 - \$50,000	None	NONE	
JT	Guidestone Balanced Allocation (IRA)	\$1,001 - \$15,000	None	NONE	
JT	Guidestone Equity Index (IRA)	\$1,001 - \$15,000	None	NONE	
JT	Guidestone Growth Allocation (IRA)	\$1,001 - \$15,000	None	NONE	
JT	Guidestone Growth Equity (IRA)	\$15,001 - \$50,000	None	NONE	
JT	Guidestone International Equity (IRA)	\$1,001 - \$15,000	None	NONE	
JT	Guidestone Small Cap Equity (IRA)	\$15,001 - \$50,000	None	NONE	
JT	Guidestone Value Equity (IRA)	\$1,001 - \$15,000	None	NONE	